ROBOTIC UTEROSACRAL LIGAMENT SUSPENSION: PROXIMITY OF THE URETERS AND THE UTEROSACRAL LIGAMENTS. ANATOMY REVIEWED.

Introduction
There is a growing recognition to support the apex of the vagina during pelvic organ procedures. Surgical options for vaginal vault suspension vaginally include sacrospinous and uterosacral ligament suspensions. This video summarizes our technique in modified high uterosacral ligament suspension following a vaginal hysterectomy.

Design
This video is based on a prospective IRB approved collection of our series from 6/2011-7/2012. 59 patients undergone vaginal uterosacral ligament suspension during that time either concurrent with vaginal hysterectomy or in a delayed fashion. We are presenting our technique and modifications to this procedure. A lone star (Scott) retractor is modified using two metal springs secured by four removable clips. All sutures placed in the uterosacral ligament are tagged using marked hemostats in numerical order from 1 thru 6 in colors blue for the needle side and red for the free tail.

Results
This is a prospective IRB approved collection of our series (n=4) from 6/2012-08/2012. Although this is a very small series with short term follow-up we would like to use this video as a review in apical suspension anatomy while using uterescalar ligaments for suspension. In this video we present our experience with Robotic uterosacral ligament suspension following a Robotic Hysterectomy. We review the pelvis anatomy with special attention to the ureters and their close proximity to the uterosacral ligaments.

Conclusion
The visibility of the pelvis specially the ureters and the uterosacral ligaments are appreciated during robotic uterosacral ligament suspension following robotic hysterectomy. Patency of the ureters during and following the high suspension of the apex of the vagina are easily demonstrated.

References

Disclosures
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